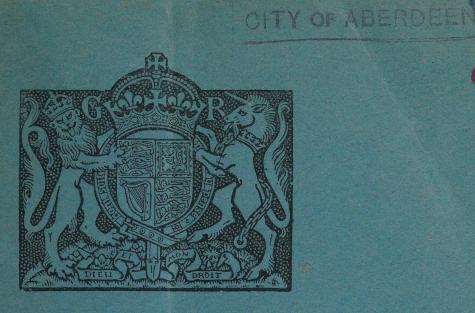
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MEDICAL OFFICER OF HEALT

MINISTRY OF HEALTH

MEMORANDUM ON THE DUTIES OF MEDICAL OFFICERS OF HEALTH IN ENGLAND AND WALES

(Other than the Medical Officer of Health of the London County Council and Medical Officers of Health and Port and Riparian Sanitary Authorities)

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MINISTRY OF HEALTH.

MEMORANDUM ON THE DUTIES OF MEDICAL OFFICERS OF HEALTH IN ENGLAND AND WALES.

(Other than the Medical Officer of Health of the London County Council and Medical Officers of Health of Port and Riparian Sanitary Authorities.)

PRELIMINARY.

1. The duties of the Medical Officer of Health are specified briefly in Article 14 of the Sanitary Officers Order, 1922 (a), and this Memorandum has been prepared in order to indicate in

more detail the scope of the duties so prescribed.

2. It will be recognised that the issue by the Minister of Health of specific directions within the meaning of Article 14 (1) of the Order may be necessary from time to time in relation to particular matters, but the suggestions which follow are not intended to be directions within the meaning of that Article.

3. An index to the Statutes, Orders and Regulations relating to the powers and duties of Medical Officers of Health will be

found in Appendix B.

There are numerous statutory provisions and departmental regulations by which powers and duties are conferred or imposed indirectly upon the Medical Officer of Health, by virtue of his position as chief advisory and executive health officer of his Authority. Some of the powers and duties of the Authority can only be exercised through the Medical Officer of Health, although that officer is not mentioned in the provisions imposing the duties or conferring the powers.

In the following paragraphs the more important of the functions, both general and specific, of Medical Officers of Health

are dealt with under certain main headings.

A.—GENERAL DUTIES.

4. The chief function of the Medical Officer of Health is to safeguard the health of the area for which he acts by such means as are at his disposal, and to advise his Authority how knowledge of public health and preventive medicine can be made available and utilised for the benefit of the community. He should endeavour to acquire an accurate knowledge of the influences, social, environmental and industrial, which may operate prejudicially to health in the area, and of the agencies, official or

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⁽a) Article 14 is reproduced in Appendix A to this Memorandum.

unofficial, whose help can be invoked in amelioration of such influences. While he has special duties for the prevention of infectious diseases, all morbid conditions contributing to a high sickness rate or mortality in the area from these or other causes should be studied with a view to their prevention or control.

5. The Medical Officer of Health should be prepared to advise on all matters concerning the public health services undertaken by the Council, and generally on questions affecting the health of the district (a) or county, including public health considerations involved in the preparation of local legislation, in the adoption of statutory provisions and in the framing and subsequent working of byelaws and regulations. He will also be called upon to take executive action where required to do so in the administration of the Statutes and Orders noted in Appendix B, and to certify for the guidance of the Council or of the Justices as to any matter in respect of which the certificate of the Medical Officer of Health or of a medical practitioner is required as the basis or in aid of sanitary action.

In accordance with Article 19 (1) of the Sanitary Officers Order, 1922, the Medical Officer of Health of a district is responsible for directing generally the performance by the Sanitary Inspector of all the duties imposed on the Sanitary Inspector by Statute,

Orders, Regulations or Byelaws.

6. For the above purposes it is essential that a Medical Officer of Health should, on appointment and periodically, familiarise himself with the statistical and other available information bearing on health conditions in his area, as well as with any local Acts and Byelaws so far as they relate to matters in which he is officially interested. In this relation, the reports of predecessors, the census returns in regard to age, sex, occupation, distribution and housing accommodation of the population, the ordnance and geological survey maps of the area, and special reports, if any, by Medical Inspectors of the late Local Government Board or Medical Officers of the Ministry of Health, or (in the case of a district within an administrative county) by the County Medical Officer of Health, will be found useful. Further, he should systematically carry out periodical inspection of each part of his area, as well as inspections of special places as the result of complaints or adverse reports or as occasion may require.

B.—SPECIFIC DUTIES.

I.—HOUSING AND TOWN PLANNING.

7. Important duties devolve on Medical Officers of Health under the Housing Acts. In addition to the duties expressly imposed on Medical Officers of Health of districts by the Housing

⁽a) Throughout this Memorandum the word "district" is intended to mean any urban or rural sanitary area other than an administrative county, and to include a county borough and a metropolitan borough unless the context otherwise requires.

of the Working Classes Act, 1890 (Sections (a) 4, 5, 30, 31, 38, as amended), every Medical Officer of Health may be called on to advise his Authority on questions relating to the housing conditions in his area, and as to the preparation of housing and town planning schemes in the case of Authorities empowered to carry out such schemes.

8. The Medical Officer of Health of a district may be appointed to perform the duties devolving on his Council under the Housing (Inspection of District) Regulations, 1910, but normally another officer, who is usually the Sanitary Inspector, is the designated officer for the purposes of these Regulations, and the Medical Officer of Health is responsible for the direction and supervision of the work.

II.—INFECTIOUS DISEASES.

(a) General.

9. It is the function of the Medical Officer of Health of a district to inquire into and advise his Authority on the adequacy of the arrangements in the district for the isolation and treatment of infectious diseases.

On being informed of the outbreak of any infectious or epidemic disease of a dangerous or unusual character within the district it is essential that he should visit the spot at once, in order to enquire into the causes and circumstances of the outbreak and to take such measures for the prevention of disease as he is legally authorised to take under any Statute or Regulation in force in the district. He should also investigate any doubtful or suspected cases of dangerous infectious disease of which he learns. If in any case he is not satisfied that all due precautions are being taken, he will, of course, advise the persons competent to act as to the measures which appear to him to be required to prevent the extension of the disease.

In conducting such investigations a Medical Officer of Health will bear in mind that the examination of patients in their own homes can be made only with the consent of the patient or of those in charge of the patient. If a medical practitioner is in

attendance, his co-operation should always be sought.

In this connection attention is drawn to the requirements of Article 14 (2) of the Sanitary Officers Order, 1922, in regard to weekly returns of notifiable infectious diseases, and to the requirements of Article 14 (4) of the same Order, and of the Public Health (Pneumonia, Malaria, Dysentery, etc.) Regulations, 1919, as to the reporting immediately to the Minister of individual cases of certain diseases or any serious outbreak of disease of which the Medical Officer of Health may become aware. In the execution of the requirements as to reporting individual cases (smallpox, cholera, typhus, etc.), the Medical Officer of Health should include suspected cases in which the diagnosis remains in doubt.

- 10. The attention of medical practitioners in the area should be drawn to any arrangements made by the Local Authority or by the County Council for the supply of diphtheria antitoxin or vaccines, and for the examination of material from suspected cases of infectious disease (including tuberculosis and venereal diseases), and the Medical Officer of Health should seek to encourage the use of such facilities, and of any arrangements for consultation with respect to doubtful cases of infectious disease.
- 11. There should be kept in a book, or by other suitable method, a separate and up-to-date chronological list of all cases of infectious disease notified in the district, giving in regard to every case notified all requisite particulars as to location, date of onset, contacts, milk supply, place of work or school attended by patient and contacts, removal to hospital, disinfection, notification to the Local Education Authority and any other action taken to prevent the spread of the disease.

(b) Tuberculosis (a).

- 12. The Medical Officer of Health of a county or county borough, unless his Council otherwise direct, should be responsible for the general supervision of the Tuberculosis Scheme of his Council with a view to co-ordinating the work of the officers engaged in that scheme, and securing the effective application of the provisions contained in the Acts and Regulations in force relating to the prevention and treatment of tuberculosis.
- 13. The fact that the Tuberculosis Scheme is administered by officers of the County Council does not affect the powers and duties conferred and imposed on the Medical Officer of Health of a district by the Tuberculosis Regulations of 1912, 1921 and 1924. Attention may be especially directed to Article XII of the Regulations of 1912 and Articles 4 and 5 of the Regulations of 1921. It is, of course, desirable that the Medical Officer of Health of a district should familiarise himself with the details of the Tuberculosis Scheme of the County Council, and co-operate with the Medical Officer of Health of the county and the Tuberculosis Officer in the effective carrying out of the scheme.

⁽a) Paragraphs 12 and 13 above should be construed in respect of Wales and Monmouthshire with due regard to the fact that the several county and county borough councils have entered into agreements, approved by the Minister, with the Welsh National Memorial Association, and that such agreements are equivalent to schemes under which approved arrangements are made under the Public Health (Tuberculosis) Act, 1921, for the treatment of tuberculosis. It accordingly follows that Medical Officers of Health in Wales and Monmouthshire should familiarise themselves with the details of the Tuberculosis Scheme of the Welsh National Memorial Association and co-operate with the officers of that Association in the effective carrying out of the scheme. Nothing in the said agreements affects the powers and duties conferred and imposed on the Medical Officer of Health of a district by the Tuberculosis Regulations of 1912, 1921 and 1924.

(c) Venereal Diseases.

14. Medical Officers of Health of counties and county boroughs should study as far as practicable the incidence of venereal diseases in their areas and advise their Councils on matters affecting the prevention, diagnosis and treatment of these diseases. It is particularly important to secure that the arrangements made to this end are widely known and effectively utilised. Medical Officers of Health of districts should endeavour to bring the arrangements available under County Schemes to the knowledge of the medical practitioners and the inhabitants of their districts, and full advantage should be taken of such opportunities as occur for effective co-operation with County Medical Officers in this respect.

III.—MIDWIVES.

15. The Medical Officer of Health appointed by a Local Authority which is a Local Supervising Authority under the Midwives Acts, 1902 and 1918 (i.e., the Council of a county or of a county borough or of a district to whom powers of supervision have been delegated by the County Council under the Midwives Act, 1902), is responsible for the supervision and inspection of the midwives practising in his area and for the administration of the Acts therein.

IV.—MATERNITY AND CHILD WELFARE.

Authority acting under the Maternity and Child Welfare Act, 1918, is responsible for the organisation, supervision and administration of the measures adopted by the Local Authority for the physical welfare of expectant and nursing mothers, and of children under five years of age who are not on the register of a school, and he should be prepared to advise the Authority on all matters relating thereto. He should, as far as practicable, seek to co-ordinate all the voluntary agencies engaged in maternity and child welfare work in his area.

V.—SCHOOLS.

17. Every Medical Officer of Health who is also appointed as School Medical Officer by the Local Education Authority and recognised as such by the Board of Education, is responsible for performing, in his capacity as School Medical Officer, all the duties laid on him by the Education Acts or by Orders and Regulations of the Board of Education, and for co-ordinating, so far as practicable, the work of the public health and school medical services.

18. It is the duty of the Medical Officer of Health of a district, when required by the Council of his district or any two members

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thereof, or whenever he himself deems it necessary, to advise the Council or any two members thereof in regard to the closure of any public elementary school, or the exclusion of individual children from any such school, with a view to preventing the spread of disease or any danger to health likely to arise from the condition of the school. (See Joint Memorandum issued by the Board of Education and the Minister of Health on Closure of and Exclusion from School, 1925.)

VI.—CARE OF THE BLIND.

19. The Medical Officer of Health of a county or of a county borough will be expected to familiarise himself with the facilities existing within his area for the treatment of disease and injury of the eye, and should include in his Annual Report to the Council a statement thereon. He should be prepared also to advise his Council as to the steps necessary to bring to the notice of medical practitioners and of affected persons the facilities available for assisting the blind in his area under any scheme made under the Blind Persons Act, 1920, or otherwise.

VII.—FOOD.

- 20. It is necessary that the Medical Officer of Health of a district should inspect from time to time and exercise general supervision over slaughter-houses, cold stores, dairies, cowsheds, milkshops, and all other premises within his district where food of any kind is prepared, stored or otherwise dealt with for sale or preparation for sale and intended for the food of man.
- 21. He will be concerned to secure in his district the effective application of the provisions of the Public Health Acts and other Acts and Regulations in force in that behalf with regard to food which is diseased, unsound, unwholesome, or unfit for human consumption.
- 22. In boroughs where the Public Analyst is appointed by the Town Council the Medical Officer of Health will be called on to supervise the administration of the Sale of Food and Drugs Acts, and of provisions of a similar nature, the enforcement of which is entrusted to the Council, and to give such advice and assistance as may be necessary to the officers charged with the duty of obtaining samples under those Acts or provisions.
- 23. The County Medical Officer of Health may be directed by his Council to supervise and report upon the administration of the Sale of Food and Drugs Acts, and of provisions of a similar nature, the enforcement of which is entrusted to authorities appointing Public Analysts, and to give such advice or render such assistance to the officers engaged in sampling duties under those Acts and provisions as may be necessary.

VIII.—OFFENSIVE TRADES.

24. The Medical Officer of Health of a district (a) should be prepared to inquire into any offensive process or trade carried on within the district, and to report upon the appropriate means for the prevention of any nuisance or injury to health arising therefrom.

IX.—NUISANCES.

25. The Medical Officer of Health of a district has all the powers of a Sanitary Inspector, and should be prepared, in cases in which his intervention appears desirable, to take such steps as he is legally authorised to take for the purpose of securing the early abatement of any nuisance injurious to health or of overcrowding in a house.

X.—MEETINGS AND RECORDS.

26. The Medical Officer of Health may be required to attend at the offices of the Council or at some other appointed place at such times as the Council may direct for the purpose of carrying out his duties, and it is desirable, unless his Council otherwise direct, that he should endeavour to attend all meetings of the Council and of Committees of the Council dealing with matters of health.

27. It is advisable that at such meetings he should, whenever necessary, submit to the Committee or Council, as the case may be, in a book provided by the Council (or in such other manner as will ensure that a permanent record is kept of his proceedings), a report in writing of the advice which he gives in regard to the improvement and protection of the public health in the area and of the action taken by the Authority.

As a general rule it is important that the Medical Officer of Health should ensure that due record is kept, in books or other convenient form, of all essential matters arising in the course

of his administrative duties.

XI.—REPORTS.

28. In addition to the Annual Report which he is required to make by the Sanitary Officers Order, 1922, the Medical Officer of Health may be called on by his Council or by the Minister of Health to make a report on any special subject. Six copies of the Annual Report and two copies of every special report should be sent to the Secretary, Ministry of Health, Whitehall, London, S.W.1; one copy of the Annual Report should be sent to the Under-Secretary of State, Home Office, Whitehall, London, S.W.1, and, if the Council is a Local Supervising Authority under the Midwives Acts, one copy of the

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⁽a) The Medical Officer of Health of a rural district will not be concerned in this matter unless the Council have been invested with urban powers.

Annual Report should be sent to the Central Midwives Board,

1, Queen Anne's Gate Buildings, Westminster, S.W.1.

One copy of the Annual Report of the County Medical Officer of Health should be sent to the Council and to the Medical Officer of Health of every district in the county, and three copies of any special report to the Council of every such district affected by the special report.

One copy of the Annual Report of the Medical Officer of Health of a district, and one copy of every special report should be sent to the Medical Officer of Health of the county or counties in which the district is situate. In this connection attention may be drawn to Section 19 of the Local Government Act of 1888.

C.—CO-OPERATION BETWEEN MEDICAL OFFICERS.

29. Section 69 (2) of the Housing, Town Planning, etc., Act, 1909, requires the Medical Officer of Health of a district outside London to give to the County Medical Officer of Health any information which it is in his power to give and which the County Medical Officer of Health may reasonably require of him for the purpose of his prescribed duties. In all matters pertaining to his duties the Medical Officer of Health of a district will naturally maintain close touch with the County Medical Officer, and an interchange of views may with advantage be sought, particularly in matters which affect the health of other districts in the county. On his side the County Medical Officer should keep Medical Officers of Health of districts informed of all matters which come to his knowledge affecting or likely to affect the public health within their respective areas, and should consult with the Medical Officer of Health of a district within the county whenever circumstances render this desirable. County Medical Officer of Health intending to visit a district for purposes of inspection or inquiry in regard to any work for which the District Council is responsible should, whenever practicable, arrange to make such visits in the company of that officer. He should also collaborate with Medical Officers of Health of districts within the county in necessary enquiries and action in relation to infectious disease (particularly when more than one such district is concerned), and should from time to time inquire into and report upon the arrangements available for the isolation and treatment of cases of smallpox and of other infectious diseases in the county, and upon any need for further hospital, nursing or other provision.

30. It is important that the Medical Officer of Health should keep in touch with the other officers of his Authority, whose work is concerned in any way with the health of the county or district, and also with the Medical Officers of Health of adjacent areas, and keep himself informed of the nature and extent of any institutional accommodation, situate outside his area, but

available for the use of the inhabitants of his area. In order to prevent overlapping it is necessary that the Medical Officer of Health of a district should ascertain the scope of the various county health services operating in the district and of the services administered by any joint boards or other bodies with public health functions on which his Authority is represented.

9

In any case in which the posts of School Medical Officer and Medical Officer of Health are not held by the same officer complete

co-operation between the two officers is essential.

MINISTRY OF HEALTH, WHITEHALL, S.W.1. March, 1925.

APPENDIX A.

SANITARY OFFICERS ORDER, 1922—ARTICLE 14.*

A Medical Officer of Health in respect of the district for which he is appointed, or if he is appointed for more than one district, then in respect of each district shall—

(1) Perform all the duties imposed on a Medical Officer of Health by any statute and by any orders, regulations or directions from time to time made or given by the Minister, and by any byelaws or instructions of the Local Authority applicable to his office;

(2) On the first Monday after the commencement of this Order, and on every Monday thereafter, forward to the Minister by post, at such an hour as in the ordinary course of post will ensure its delivery to the Minister on the following Tuesday morning, a return, in such form as the Minister may from time to time require, of the number of cases of infectious disease notified to him during the week ended on the preceding Saturday night, and shall also forward at the same time a duplicate of the return to the Medical Officer or Officers of Health of the county or counties in which the district is situated;

(3) As soon as practicable after the 31st day of December in each year make an Annual Report to the Local Authority up to the end of December on the sanitary circumstances, the sanitary administration, and the vital statistics of the district, containing, in addition to any other matters upon which he may consider it desirable to report, such information as may from time to

time be required by the Minister;

(4) Forthwith report to the Minister any case of plague, cholera or smallpox, or any serious outbreak of disease in the district which may be notified to him, or which may otherwise come or be brought to his knowledge, and, in the case of a county district, shall also notify the Medical Officer of Health of the county.

^{*} Paragraphs (1) and (3) apply to all Medical Officers of Health other than the Medical Officer of Health of the London County Council; paragraph (2) applies only to the Medical Officers of Health of sanitary districts outside London; and paragraph (4) applies to all Medical Officers of Health other than the Medical Officer of Health of a County.

APPENDIX B.

INDEX TO THE STATUTES, ORDERS, REGULATIONS, ETC., RELATING TO THE POWERS AND DUTIES OF THE MEDICAL OFFICER OF HEALTH.

(See paragraph 3 of the memorandum.)

Except where otherwise stated the index refers to the powers and duties of the District Medical Officer of Health, and not directly to those of the County Medical Officer of Health.

Notes.

Note 1.—In these cases the functions of the Medical Officer of Health are of an advisory character.

Note 2.—In these cases duties may be performed by the Medical Officer of Health in his capacity as sanitary inspector.

Note 3.—In these cases the powers and duties of the Medical Officer of Health under the Act mentioned are only exerciseable where the Act has been adopted for the district, or an order has been made putting the provisions of the Act in force in the district, as the case may be.

ABBREVIATIONS.

C.M.O.H. means County Medical Officer of Health.

D.M.O.H. means District Medical Officer of Health.

M.O.H. means Medical Officer of Health.

S.O.O. means Sanitary Officers Order.

P.H. means Public Health.

P.H.A.A. Act means Public Health Acts Amendment Act.

I.D.P. Act means Infectious Disease (Prevention) Act.

P.H. (L) Act means Public Health (London) Act.

L.G.B. means Local Government Board.

M.H. means Ministry of Health.

S.R.O. means Statutory Rule and Order. (Reference is given to the number of the order in that series as published by H.M. Stationery Office.) Copies may be purchased, either directly or through any bookseller, from His Majesty's Stationery Office, at the following addresses:—Adastral House, Kingsway, London, W.C.2; 28, Abingdon Street, London, S.W.1; York Street, Manchester; 1, St. Andrew's Crescent, Cardiff; and 120, George Street, Edinburgh.

Orders, etc., dated before 1 July 1919, were issued by the L.G.B.; those dated later, by the M.H.

London: References to Orders, Circulars and Memoranda, apply to London unless otherwise stated. References to P.H.A. 1875, and P.H.A.A. Acts 1890, 1907, do not apply to London.

Alkali works—

supervision: (works contravening the Act or causing nuisance should be reported to the Chief Alkali Inspector) (note 1)—Alkali, etc., Works Regulation Act 1906.

Ambulance-

provision: P.H. Act, 1875: s. 123 (note 1); P.H.A.A. Act 1907: s. 50 (notes 1, 3). [In London, P.H. (L.) Act 1891: s. 78 (note 1).]

Animal—

intended for food, inspection, &c.—P.H. Act 1875: s. 116-119. [In London, P.H. (L.) Act 1891: s. 47.] . . nuisance from (byelaws, note 1)—P.H. Act 1875: s. 44, 91. [In London, P.H. (L.) Act 1891: s. 16.]

Annual report—

see reports.

Anthrax—

infection from contaminated shaving brushes—Circular 172 (28 Jan. 1921); Circular 252 (17 Oct. 1921). and see infectious disease.

Antitoxin, diphtheria—

gratis distribution—Diphtheria Antitoxin (Outside London) Order 1910 (S.R.O. 867 of 1910); Circular 15 Aug. 1910. [In London, Diphtheria Antitoxin (London) Order 1910 (S.R.O. 868 of 1910); Circular 15 Aug. 1910.] memorandum of M.H.—No. 68 Med. July 1922.

and the state of t

Appointment, qualification, salary, tenure of office—

of D.M.O.H.—P.H. Act 1875: s. 189–191 and 286. Local Govt. Act 1888: s. 18. [P.H. (L.) Act 1891: s. 106-109.] P.H. (Officers) Act, 1921. S.O.O. 1922 (S.R.O. 276 of 1922).

of C.M.O.H.—Local Government Act 1888: s. 17, 18, 24 (2). Housing etc., Act 1909: s. 68.

Ashpit-

insufficient, or nuisance (note 2)—P.H. Act 1875: s. 36, 41, 91; P.H.A.A. Act 1890: s. 11. [In London, P.H. (L.) Act 1891: s. 2, 37, 62.]

Bakehouse, retail bakehouse—

sanitary conditions, power of entry, inspection, proceedings—Factory and Workshop Act 1901: s. 97 to 102 (note 1). [In London: P.H. (L.) Act 1891: s. 26.]

Bedding-

see disinfection.

Births-

notification—Notification of Births Acts 1907 and 1915. Send duplicate to C.M.O.H.—Notification of Births Act 1915, s. 1. [In London, send weekly list to London County Council—Notification of Births Act 1907, s. 2, and Order of L.G.B. 20 Dec. 1907 (S.R.O. 1022 of 1907).]

Blind-

care of—Blind Persons Act 1920 (C.M.O.H. & Co. Boro. M.O.H.).

Botulism-

provision of botulinus antitoxic serum—M.H. Circular 342 (12 Sept. 1922). Instructions for use of serum—Memorandum of M.H. accompanying the Circular.

Byelaws—

duties of M.O.H.—S.O.O. 1922: Art. 14 (S.R.O. 276 of 1922).

model series of byelaws have been prepared by M.H. upon most of the subjects for which byelaws which require his confirmation can be made by the council (note 1).

general provisions—P.H. Act 1875: s. 182-187. P.H. (Confirmation of Byelaws) Act 1884: s. 2-4. [In London, P.H. (L.) Act 1891:

particular enactments enabling the making of, are as follows:

animals, keeping of—P.H. Act 1875: s. 44. [In London, P.H. (L.) Act 1891: s. 16.]

bathing—P.H. Act 1875: s. 171. P.H.A.A. Act 1907: s. 92 (note 3). baths, wash-houses, bathing places—Baths and Washhouses Act 1846: s. 34.

buildings—P.H. Act 1875: s. 157. P.H.A.A. Act 1890: s. 23 (note 3). [In London, London Bldg. Act 1894: s. 164.]

cabmen's shelters—P.H.A.A. Act 1890: s. 40 (note 3).

cemeteries—P.H. (Interments) Act 1879: s. 2.

cleansing cisterns—In London, P.H. (L.) Act 1891: s. 50.

common lodging-houses—P.H. Act 1875: s. 80.

fruit-pickers' and hop-pickers' lodgings—P.H. Act 1875: s. 314. P.H. (Fruit Pickers' Lodgings) Act 1882: s. 2.

houses let in lodgings-P.H. Act 1875: s. 90. Housing Act 1885: s. 8, 10. [In London, P.H. (L.) Act 1891: s. 94.]

houses divided into separate tenements—Housing Act, 1919: s. 26.

[In London, P.H. (L.) Act 1891: s. 14.] markets—P.H. Act 1875: s. 167; Markets, etc., Act 1847: s. 42. mortuaries—P.H. Act 1875: s. 141. [In London, P.H. (L.) Act 1891: s. 88.]

new streets and buildings-P.H. Act 1875: s. 157; P.H.A.A. Act 1890: s. 23 (note 3). [In London, London Bldg. Act 1894: s. 164.] offensive trades—P.H. Act 1875: s. 113. P.H.A.A. Act 1907: s. 1 (note 3). [In London, P.H. (L.) Act 1891: s. 19.]

prevention of nuisances—P.H. Act 1875: s. 44. [In London, P.H.

(L.) Act 1891: s. 16.]

removal of infected person to hospital—P.H. Act 1875: s. 125. London, P.H. (L.) Act 1891: s. 66.]

removing offensive matter—P.H.A.A. Act 1890: s. 26 (note 3). London, P.H. (L.) Act 1891: s. 16.]

sanitary conveniences—P.H.A.A. Act 1890: s. 20 (note 3).

scavenging—P.H. Act 1875: s. 44. [In London, P.H. (L.) Act 1891: s. 16.]

slaughter-houses—P.H. Act 1875: s. 169.

tent, van, shed-Housing Act 1885: s. 9. [In London, P.H. (L. Act 1891: s. 95.

underground rooms as sleeping places—Housing Act 1909: s. 17. water-closets, etc.—P.H. Act 1875: s. 157. P.H.A.A. Act 1890: s. 23 (note 3). [In London, P.H. (L.) Act 1891: s. 39.]

Canal boats—

registration and sanitary regulation—Canal Boats Acts 1877, 1884 (note 1); Registration of Canal Boats Order, 20 March 1878; Canal Boats Order 1922 (S.R.O. 451 of 1923); Circular 327 (1 May 1923).

Cancer—

circulars (and appended memoranda) of M.H.—Nos. 426 (14 Aug. 1923), 476 (6 March 1924), 496 (19 May 1924), 516 (31 July 1924) (note 1).

Cellar dwellings and underground rooms—

unlawful occupation—P.H. Act 1875: s. 71-75; Housing, etc., Act 1909: s. 17 (7). [In London, P.H. (L.) Act 1891: s. 96 to 98.]

Cemeteries-

advising as to provision and byelaws (note 1)—P.H. (Interments) Act 1879.

Cerebro-spinal fever—

notification—P.H. (Cerebro-Spinal Fever and Acute Poliomyelitis) Regulations 1912 (S.R.O. 1226 of 1912) and Circular 16 Aug. [In London, Order of London County Council approved by L.G.B. 2 March 19127.

examination and treatment of cases, suspected cases and contacts— (C.M.O.H. and Co. Borough M.O.H.); P.H. (Cerebro-spinal Fever) Regulations 1919 (S.R.O. 767 of 1919); Circular 17 June 1919.

memorandum of L.G.B., Aug. 1918; Circulars 181 (23 Feb. 1921) and 366 (9 Feb. 1923).

Certificate of M.O.H.-

back to back tenements—Housing, etc., Act 1909: s. 43.

cleansing verminous (a) house, (b) person. [In London, L.C.C.

(General Powers) Acts 1904: s. 20; 1907: s. 36.]

cleansing, etc., infected premises and articles—P.H. Act 1875: s. 46, 120; I.D.P. Act 1890: s. 5, 6 (note 3); P.H.A.A. Act, 1907: [In London, P.H. (L.) Act 1891: s. 59, 60; London s. 66 (note 3). County Council (General Powers) Act 1904, s. 21.]

cleansing factory, workshop, workplace—F. & W. Act 1901: s. 2.

[In London, P.H. (L.) Act 1891: s. 25.]

dead bodies—I.D.P. Act 1890: s. 8, 9 (note 3). [In London, P.H. (L.) Act 1891: s. 72, 73.7

infectious disease on canal boat—Canal Boats Act 1877: s. 4.

offensive trade, nuisance—P.H. Act 1875: s. 114. [In London, P.H. (L.) Act 1891: s. 21.]

purification of filthy house—P.H. Act 1875: s. 46; and articles P.H.A.A. Act 1907: s. 56 (note 3). [In London, L.C.C. (General Powers) Act, 1904: s. 19, 21.7

removal of infected person to hospital—P.H. Act 1875: s. 124. [In

London, P.H. (L.) Act 1891: s. 66.]

removal of person from infected house-P.H.A.A. Act 1907: s. 61

water supply to house in rural district—P.H. (Water) Act 1878: s. 6. and see cholera, housing, infectious disease, overcrowding, rent restriction.

Cesspool-

nuisance (notes 2, 3)—P.H. Act 1875: s. 41, 91; P.H.A.A. Act 1907: s. 46 (note 3). [In London, P.H. (L.) Act, 1891: s. 2.]

Children-

health of school children; employment—Education Act 1921, Parts vii and viii (note 1). Employment of Women, Young Persons and Children Act 1920.

and see school hygiene, maternity and child welfare.

Cholera, yellow fever and plague-

coasting ships—Regulations as to Cholera, Yellow Fever and Plague. Sept. 1907 (S.R.O. 694 of 1907); Circular 9 Sept. 1907.

outward bound ships-

Regulations as to Cholera, Yellow Fever and Plague, Sept. 1907 (S.R.O. 695 of 1907); Circular 9 Sept. 1907.

report any cases to M.H.—Sanitary Officers Order 1922 (S.R.O. 276) of 1922).

ships arriving from foreign ports-

Regulations as to Cholera, Yellow Fever and Plague, Sept. 1907 (S.R.O. 710 of 1907); Circular 9 Sept. 1907. and see epidemic diseases.

Closet accommodation—

insufficient, or nuisance (note 2)-P.H. Act 1875: s. 36, 41, 91. [In London, P.H. (L.) Act 1891: s. 2, 37-43.] provision and conversion (note 3)—P.H.A.A. Act 1907: s. 39-42.

Common lodging house—

control—P. H. Act 1875: s. 76 to 89; P.H.A.A. Act 1907: s. 69 [In London, Common Lodging House Acts 1851 and to 75 (note 3). 1853; L.C.C. General Powers Acts, 1902, 1904, 1907.]

infectious disease in—P.H. Act 1875: s. 84.

seamen's lodging house, sanitary control, byelaws—Merchant Shipping Act 1894: s. 214. Order in Council 13 June 1917. [Does not apply to D.M.O.H. in London.]

Conveyances, infected—

notification to M.O.H.—P.H.A.A. Act 1907: s. 64 (note 3).

See milk.

Cremation—

provision of crematoria (note 1)—Cremation Act 1902. M.O.H. may be medical referee—Cremation Regulations of Secretary of State, 26 April 1920.

Dairies, cowsheds and milkshops—

control—Dairies, Cowsheds and Milkshops Orders 1885, 1886, 1899; Contagious Diseases (Animals) Act 1878: s. 34; 1886: s. 9; I.D.P. Act 1890: s. 4 (note 3). [Also in London P.H. (L.) Act 1891: s. 28, 71, London Government Act 1899: s. 5; L.C.C. (General Powers) Act 1907.

and see milk.

Deaths, transferable—

distribution of, for vital statistics—Memorandum of Registrar General, Jan. 1922.

Deputy-

qualification, duties—P.H. Act 1875: s. 191; Local Govt. Act 1888: s. 18; Housing of the Working Classes Act 1890: s. 79; P.H. (Officers) Act, 1921: s. 4. [In London, P.H. (L.) Act 1891: s. 109.] S.O.O. 1922 (S.R.O. 276 of 1922). [Also of C.M.O.H. Housing Act 1909: s. 68 (6).]

Diarrhœa, epidemic prevention—Circular 217 (15 July 1921).

Diphtheria-

see antitoxin.

Disinfection—

infected premises, articles, bedding, conveyances—P.H. Act 1875: s. 120, 122; I.D.P. Act 1890: s. 5, 6, 7, 11 (note 3). P.H.A.A. Act 1907; s. 55, 64, 66 (note 3). [In London, P.H. (L.) Act 1891: s. 59—61.]

nuisance, or defective, or insufficient (note 2), P.H. Act 1875: s. 41; P.H.A.A. Act 1907: s. 34, 45, 49 (note 3). [In London, P.H. (L.) Act 1891: s. 2, 42, 43.]

Dysentery—

notification: duties—P.H. (Pneumonia, Malaria, Dysentery, etc.) Regulations 1919 (S.R.O. 170 of 1919); Circular, P.H. 2, 1919. (Jan. 1919.) [Also, in London, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920) and M.H. Circular 85 (23 April, 1920).]

Encephalitis lethargica—

notification-P.H. (Acute Encephalitis Lethargica and Acute Polio-Encephalitis) Regulations 1918 and 1919 (S.R.O. 1741 of 1918 and 2048 of 1919); Circulars 18 Dec. 1918, 31 Dec. 1919. [Also, in London, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920) and M.H. Circular 85 (23, April 1920).] M.H. memorandum-No. 45 Med., as revised, May 1924.

Enteric fever-

notification, duties-P.H. (Pneumonia, Malaria, Dysentery, etc.) Regulations 1919 (S.R.O. 170 of 1919) and Circular, Jan. 1919.

Entry, power or right of—

bakehouses—Factory and Workshop Act 1901: s. 102. [In London, P.H. (L.) Act 1891: s. 26.]

canal boats—Canal Boats Act 1877: s. 5.

common lodging houses-P.H. Act 1875: s. 85. [In London, L.C.C. General Powers) Act 1907: s. 37.]

C.M.O.H.—Housing Act 1909: s. 68.

dairies—Contagious Diseases (Animals) Act 1886: s. 9. [In London,

P.H. (L.) Act 1891: s. 28, 71.] drains, w.c.'s, etc. (note 2)—P.H. Act 1875: s. 41. [In London, P.H. (L.) Act 1891: s. 40, 41.] drains, sewers—P.H. Act, 1875, s. 305.

epidemic diseases-P:H. Act 1875: s. 137. [In London, P.H. (L.), Act 1891: s. 82.]

general power, and legal proceedings connected with entry. [In London, P.H. (L.) Act 1891: s. 115.]

housing acts purposes (general)—Housing, etc., Act 1909: s. 36, 68. infected premises, cleansing—I.D.P. Act 1890: s. 17 (note 3). [In London, P.H. (L.) Act 1891: s. 60.]

nuisances, abatement—P.H. Act 1875: s. 41, 98, 102. [In London, P.H. (L.) Act 1891: s. 10.]

refuse, etc., entering sewers-P.H.A.A. Act 1890: s. 17.

slaughterhouse, knacker's yard—P.H. Act 1875: s. 169 and Towns Improvement Clauses Act 1847: s. 131. [In London, P.H. (L.) Act 1891: s. 20.

smoke abatement—P.H. Act 1875: s. 102. [In London, P.H. (L.) Act 1891: s. 23, 24.]

tents and vans, nuisances and infectious diseases in-Housing Act 1885: s. 9. [In London, P.H. (L.) Act 1891: s. 95.]

underground rooms. [In London, P.H. (L.) Act 1891: s. 97.] food and unsound food—P.H. Act 1875: s. 116, 119; Sale of Horseflesh Act, 1889: s. 3, 4. [In London, P.H. (L.) Act 1891: s. 47.]

upon justices' order—P.H. Act 1875: s. 102, 119, 305. [In London, P.H. (L.) Act 1891: s. 115.]

water supply, domestic-P.H. (Water) Act 1878: s. 7.

workshops and workplaces—Factory and Workshop Act 1901: s. 125.

Epidemic diseases prevention—

general control—P.H. Act 1875: s. 130 and 134 to 140. [In London, P.H. (L.) Act 1891: s. 82–87.]

report outbreak to M.H. and C.M.O.H.—S.O.O. 1922: Art. 14 (S.R.O. 276 of 1922).

Excessive sickness-

inquiry by Ministry of Health into causes of-National Health Insurance Act 1924: s. 107.

Factory: duties—Factory and Workshop Act 1901: s. 132, 133. memorandum on duties—Memorandum of Home Office, March 1912. nuisance--P.H. Act 1875: s. 91. [In London, P.H. (L.) Act 1891: s. 2.] and see bakehouse, reports.

Filth-

certifying as to filthy house and accumulations—P.H. Act 1875: s. 46, 49 (note 2). [In London, London County Council (General Powers) Act 1904: s. 19.]

Food-

importation, preparation, storage, distribution—P.H. (Regulations as to Food) Act 1907.

inspection, etc., by D.M.O.H.—P.H. Act 1875: s. 116 to 119; P.H.A.A. Act 1890: s. 28;

sale of food and drugs, administration of law (note 1)—Sale of Food and Drugs Acts 1875, 1879, 1899; Margarine Act 1887; Butter and Margarine Act 1907. (C.M.O.H. also concerned).

samples, taking (note 1)—Sale of Foods and Drugs Act 1875: s. 13; 1879: s. 3, 4; 1899: s. 14; Margarine Act 1887: s. 10

and see foreign meat, meat, milk, unsound food.

Foot and mouth disease—

infected animals: slaughter or isolation—Order of Minister of Agriculture and Fisheries (9 March 1922); and Circulars 306 (2 May 1922), 502 (16 June 1924).

Foreign Meat—

regulations—P.H. (Foreign Meat) Regulations 1908 and 1909 (S.R.O. 717 of 1908 and 1064 of 1909); and L.G.B. Circulars, 16 Sept. 1908, 30 Sept. 1909.

Fruit pickers' lodgings-

byelaws (note 1)—P.H. (Fruit Pickers' Lodgings) Act 1882.

General duties—

county medical officer of health—Housing, etc., Act 1909: s. 68, 69; Sanitary Officers Order 1922 (S.R.O. 276 of 1922) [does not apply to London C.M.O.H.]

district medical officer of health—P.H. Act 1875: s. 191; Housing, etc., Act 1909: s. 69. [In London, P.H. (L.) Act 1891: s. 106]; and Sanitary Officers Order 1922 (S.R.O. 276 of 1922).

Health propaganda—

memorandum of M.H.—July 1924.

Health visitors—

training—Circular 557 (9 Feb. 1925) and Memorandum 101/M.C.W. (Feb. 1925).

Homework—

prohibited where infections disease (note 1)—Factories, etc., Act 1901: s. 110.

Hop pickers' lodgings-

byelaws (note 1)—P.H. Act 1875: s. 314.

Horseflesh-

supervision of sale: inspection—Sale of Horseflesh, etc., Regulation Act 1889: s. 3, 4.

Hospital-

isolation hospital accommodation (note 1)—P.H. Act 1875: s. 131–133; Isolation Hospitals Acts 1893, 1901. P.H.A.A. Act 1907: s. 60 (note 3). [In London, P.H. (L.) Act 1891: s. 75–81.]

memorandum of M.H. (Hosp. 2). Jan. 1924.

report, on needs of district, by C.M.O.H. Isolation Hospitals Act 1893: s. 3, 6.

Housing-

housing schemes, advising on (note 1)—Housing, etc., Acts 1890, 1909, 1919, 1921, 1923, 1924.

house unfit for habitation—Housing, etc., Act 1909: s. 17.

Housing—continued.

house to house inspection of district—Housing, etc., Act 1909: s. 17; Housing (Inspection of District) Regulations 1910 (S.R.O. 919 of 1910), and L.G.B. Circular, 3 Sept. 1910.

obstructive building—Housing, etc., Act 1890: s. 38.

parish council—may complain to D.M.O.H. as to unhealthy dwellings or obstructive buildings—Local Government Act 1894: s. 6 (2).

powers of entry—Housing, etc., Act 1909: s. 36, 68, 69.

representations to be in writing—Housing, etc., Act 1890: s. 79 unhealthy areas and houses—Housing, etc., Act 1890: s. 4, 5, 16, 30, 31 as amended by Housing Acts 1909, 1919, 1923.

unhealthy areas, representation by D.M.O.H.—Housing of Working

Classes Act 1890: s. 4, 5 (as amended).

unfit, unhealthy, or obstructive dwellings: representation by D.M.O.H.

—Housing of Working Classes Act 1890: s. 30, 31 (as amended);

Housing, etc., Act 1909: s. 17 (2).

and see certificates, overcrowding, reports.

Infected person in public conveyance—

notification—P.H.A.A. Act 1907: s. 64 (note 3).

Infected premises—

cleansing—I.D.P. Act 1890: s. 5 (note 3); P.H.A.A. Act 1907: s. 66 (note 3). [In London, P.H. (L.) Act 1891: s. 60.]

Infectious disease—

general control—P.H. Act 1875: s. 120-130; I.D.P. Act 1890 (note 3); P.H. Acts 1896, 1904; P.H.A.A. Act 1907: Part 4 (note 3); P.H. (Prevention and Treatment of Disease) Act 1913. [In London, P.H. (L.) Act 1891: s. 58-74.]

in house to let—P.H. Act 1875: s. 128, 129. [In London, P.H. (L.)

Act 1891: s. 63, 64.]

in common lodging house—P.H. Act 1875: s. 84.

notification—Infectious Disease Notification Acts 1889 and 1899. [In London, P.H. (L.) Act 1891; s. 55–57. Also, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920) and Circular 85 (23 April 1920.)]

notification, by dairymen—P.H.A.A. Act 1907: s. 54 (note 3).

notification: form—P.H. (Notification of Infectious Disease) Regulations 1918 (S.R.O. 67 of 1918), and L.G.B. Circular, 19 Jan. 1918.

suspected milk supply—P.H.A.A. Act 1907: s. 53. temporary accommodation—I.D. (P.) Act 1890: s. 15; P.H.A.A. Act 1907: s. 61.

weekly returns, in London—P.H. (L.) Act 1891: s. 55 (4).

weekly returns to M.H. and C.M.O.H. by D.M.O.H.—S.O.O. 1922 (S.R.O. 276 of 1922). [Does not apply to London.]

and see entry, milk, school closure (and the several diseases).

Influenza-

precautions—M.H. Pamphlet, Jan. 1920.

prevention—M.H. Circular 50 (20 Dec. 1919); M.H. Memorandum No. 2 Med. (Dec. 1919).

Inspection of district—

housing conditions—Housing, etc., Act 1909: s. 17; Housing (Inspection of District) Regulations 1910 (S.R.O. 919 of 1910); L.G.B. Circular, 3 Sept. 1910.

nuisance, detection of (note 1)—P.H. Act 1875: s. 92. [In London, P.H. (L.) Act 1891: s. 1.]

Lice-

prevention of lousiness and itch—Memorandum, Feb. 1919. and trench fever—P.H. (Pneumonia, etc.), Regulations 1919 (S.R.O. 170 of 1919); Circular No. P.H. 2 of 1919 (Jan. 1919). Lodging houses—

houses let in lodgings (note 1)—P.H. Act 1875: s. 90. Housing Act 1885: s. 8, 10. [In London, P.H. (L.) Act 1891: s. 94.] but see common lodging houses.

Malaria-

notification—P.H. (Pneumonia, Malaria, etc.) Regulations 1919 (S.R.O. 170 of 1919); Circular P.H.2 of 1919 (Jan. 1919). [In London, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920), and M.H. Circular 85 (23 April 1920.)]

Maternity and child welfare—

administrative arrangements—Notification of Births (Extension) Act 1915: s. 2; Maternity and Child Welfare Act 1918; Circular, M. and C.W. 4 (9 Aug. 1918).

maternal mortality—Circular 517 (30 June 1924).

supply of milk for mothers and infants—Circular 185 (31 March 1921).

Measles and german measles—administrative arrangements—M.H. Circular 35 (28 Nov. 1919).

Meat-

inspection, general—P.H. Act 1875: s. 116-119. Circular 282 (16 March 1922) and M.H. Memorandum 62/Foods (March 1922).

horseflesh—Sale of Horseflesh Regulations Act 1889.

slaughter, inspection and marking, marketing, cleanliness—P.H. (Meat) Regulations 1924 (S.R.O. 1432 of 1924); Circular 547 (29 Dec. 1924). see slaughterhouses, unsound food.

Midwives-

supervision and inspection—Midwives Acts 1902, 1918. provision—Circular, M. and C.W. 4 (9 Aug. 1918). training and supply—Circular 559 (27 Feb. 1925), and Memorandum 102/M.C.W. (Feb. 1925).

Milk-

condensed milk control—P.H. (Condensed Milk) Regulations 1923 (S.R.O. 509 of 1923); Circular 393 (4 May 1923).

dried milk—P.H. (Dried Milk) Regulations 1923 (S.R.O. 1323 of 1923);

M.H. Circular 452 (8 Nov. 1923).

general control—Dairies, Cowsheds and Milkshops Orders 1885, 1886, 1899; Contagious Diseases (Animals) Acts 1878, 1886; Milk and Dairies (Consolidation) Act 1915; Milk and Dairies (Consolidation) Act 1915 (Commencement of Operation) Order 1922 (S.R.O. 908 of 1922); M.H. Circular 335 (28 Aug. 1922); Milk and Dairies (Amendment) Act 1922. [Also, in London—P.H. (L.) Act 1891: s. 71. L.C.C. (General Powers) Acts 1907, 1908.]

graded milk, bacteriological tests—Instructions, 1922.

graded milk—Milk (Special Designations) Order 1923 (S.R.O. 601 of 1923); M.H. Circular 356 (12 Dec. 1922); M.H. Circular 362 (19 Dec. 1922); M.H. Circular 408 (29 May 1923).

milk and cream preservatives, control—P.H. (Milk and Cream) Regulations 1912 and 1917 (S.R.O. 1152 of 1912 and 141 of 1917.) L.G.B. Circulars 6 Aug. 1912 and 9 Feb. 1917.

prohibiting suspected milk supply—I.D.P. Act 1890: s. 4 (note 3).

[In London, P.H. (L.) Act 1891: s. 71.]

suspected sources: dairyman to furnish—P.H.A.A. Act 1907: s. 53 (note 3).

and see foot and mouth disease, infectious disease.

Mortuaries_

provision and byelaws (note 1)—P.H. Act 1875: s. 141-143. [In London, P.H. (L.) Act 1891, s. 88-93.]

New streets and buildings—

by elaws, health questions in (note 1)—P.H. Act 1875: s. 157; P.H.A.A. Act 1890: s. 23 (note 3). [In London, London Building Act 1894.]

Notification—

see births, conveyances, infectious diseases, workshops.

Noxious accumulations—

requiring removal (note 2)—P.H. Act 1875: s. 49. [In London, P.H. (L.) Act 1891: s. 35.]

Nuisances, general—

supervision of suppression (note 1)—P.H. Act 1875: s. 44, 91-111. [In London, P.H. (L.) Act 1891: s. 1 to 18, 23, 24.]

Offensive trades—

nuisances from—P.H. Act 1875: s. 112-115; P.H.A.A. Act 1907: s. 51 (note 3). [In London, P.H. (L.) Act 1891: s. 19, 21.]

Ophthalmia neonatorum—

notification—Public Health (Ophthalmia Neonatorum) Regulations 1914 (S.R.O. 91 of 1914); L.G.B. Circular 6 Feb. 1914. [In London, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920) and Circular 85 (23 April 1920). notification, form of—see infectious disease.

Overcrowding—

of house, a nuisance—P.H. Act 1875: s. 91. [In London, P.H. (L.) Act 1891: s. 2, 4, 7.] of tent, van, shed.—Housing Act, 1885: s. 9. [In London, P.H. (L.) Act 1891: s. 95.]

Plague—

memorandum on, of L.G.B., Nov. 1910. notification—Order of L.G.B., 19 Sept. 1900 (S.R.O. 695 of 1900) and L.G.B., Circular 20 Sept. 1900. and see cholera, rats.

Pneumonia—

memorandum on—Jan. 1919. notification—P.H. (Pneumonia, etc.) Regulations, 1919 (S.R.O. 170 of 1919); Circular, Jan. 1919. [In London, Notification of Infectious Disease (London) Regulations 1920 (S.R.O. 623 of 1920) and Circular 85 (23 April 1920).]

Polio-Encephalitis-

notification-P.H. (Acute Encephalitis Lethargica and Acute Polio-Encephalitis) Regulations 1918 and 1919 (S.R.O. 1741 of 1918 and S.R.O. 2048 of 1919). Circulars, 18 Dec. 1918, 31 Dec. 1919.

Poliomyelitis-

memorandum on, of L.G.B.—August 1917.

notification—P.H. (Cerebro-Spinal Fever and Acute Poliomyelitis) Regulations 1912 (S.R.O. 1226 of 1912) and L.G.B. Circular, 16 Aug. 1912. [In London, Order of London County Council approved by L.G.B., 2 March 1912.]

Pollution-

of water sources and storage (note 1)—P.H. Act 1875: s. 68-70. [In London, P.H. (L.) Act, 1891: s. 54.] and see rivers pollution.

anti-rabic treatment—memorandum of M.H.—Oct. 1924; Circular 523 (30 Oct. 1924).

Rag flock-

control of manufacture—Rag Flock Act 1911; Rag Flock Regulations 1912 (S.R.O. 578 of 1912); Circular "P.H. 4" (26 May 1919).

Rats and mice—

destruction—Rats and Mice Destruction Act 1919; Destruction of Rats Order 1910 (S.R.O. 1165 of 1910); L.G.B. Circular, 10 Nov. 1910.

Relapsing fever—notification—P.H. (Pneumonia, etc.) Regulations 1919 (S.R.O. 170 of 1919); Circular, P.H. 2 (Jan. 1919).

Rent-book-

name of D.M.O.H. to be inserted—Housing, Town Planning, etc., Act 1919: s. 29.

Rent restriction—

certificate as to state of house (note 1)—Increase of Rent, etc., Restriction Acts, 1920: s. 2, 1923: s. 18.

Reports-

to Council: annual report, etc.; and copies to M.H.—Sanitary Officers Order 1922 (S.R.O. 276 of 1922); M.H. Circular 269 (28 Dec. 1921); Circulars 299 (29 March 1922); 359 (10 Jan. 1923); 451 (15 Dec. 1923); 540 (England) (18 Dec. 1924.)

to County Council: D.M.O.H. to send copy—Local Government Act

1888: s. 19.

include information as to housing—Housing (Inspection of District) Regulations 1910 (S.R.O. 919 of 1910); L.G.B. Circular, 3 Sept. 1910.

workshops and workplaces: and copy to Secretary of State—Factory and Workshop Act 1901: s. 132; M.H. Circular 359 (10 Jan. 1923)

Rivers pollution—

administration (note 1)—Rivers Pollution Prevention Acts 1876, 1893; Local Government Act 1888: s. 14.

Sanitary conveniences, public—

provision of (note 1)—P.H. Act 1875: s. 39; P.H.A.A. Act 1890; s. 20 (note 3); P.H.A.A. Act 1907: s. 43, 44, 47 (note 3); [In London, P.H. (L.) Act 1891: s. 44, 45.]

Sanitary inspector—

powers of, conferred on D.M.O.H.—P.H. Act 1875: s. 191. [In London, P.H. (L.) Act 1891: s. 106.]

Scavenging and cleansing—

advising re byelaws (note 1)—P.H. Act 1875: s. 44. In London, P.H. (L.) Act 1891: s. 16.]

School hygiene—

health and well-being of scholars; medical inspection and treatment; meals; cleansing verminous children.—Education Act 1921: Part vii.

prevention of infectious disease—P.H.A.A. Act 1907: s. 57, 58 (note 3); Joint Memorandum by Board of Education and M.H. 1925. [Also, in London, P.H. (L.) Act 1891: s. 55 (4).].

Search warrant—

for unsound food—P.H. Act 1875: s. 119. [In London, P.H. (L.) Act 1891: s. 115.]

Shellfish-

infectious disease—P.H. (Shellfish) Regulations 1915 (S.R.O. 125 of 1915).

Slaughterhouses—

administration, licensing, byelaws (note 1)—P.H. Act 1875: s. 169, 170; P.H.A.A. Act 1890: s. 29–31 (note 3). [In London, P.H. (L.) Act 1891: s. 20.]

powers of control extended to all rural districts—Rural District Councils (Slaughterhouses) Order 1924 (S.R.O. 1431 of 1924); Circular 552 29 Dec. 1924.)

Smallpox—

outbreaks of mild clinical type—M.H. Memorandum, No. 69 Med. (July 1922).

report any case to M.H.—Sanitary Officers Order 1922 (S.R.O. 276 of 1922.)

steps on occurrence of—M.H. Memorandum, No. 71a Med. (Nov. 1922) and M.H. Circular 350 (6 Nov. 1922).

vaccination of contacts—P.H. (Smallpox Prevention) Regulations 1917 (S.R.O. 146 of 1917); L.G.B. Circular, 13 Feb. 1917.

vaccine lymph—M.H. Memorandum, P.H. 6 of 1919 (August 1919).

Smoke—

nuisance—P.H. Act 1875: s. 91. [In London, P.H. (L.) Act 1891: s. 23, 24.]

Theatre, music hall, etc.—

sanitary condition of (note 2)—Circular 120 (25 Aug. 1920). [Does not apply to London.]

Town planning—

advising on administration—Housing, Town Planning, etc., Acts 1909, 1919.

Trench fever-

notification—P.H. (Pneumonia, etc.) Regulations 1919 (S.R.O. 170 of 1919); Circular, P.H. 2 of 1919 (Jan. 1919). [In London, Notification of Infectious Disease (London) Regulations, 1920 (S.R.O. 623 of 1920) and M.H. Circular 85 (23 April 1920).]

Tuberculosis-

notification duties—P.H. (Tuberculosis) Regulations 1912, 1921 and 1924 (S.R.O. 1813 of 1912, 660 of 1921 and 1411 of 1924); 2 Circulars, 20 Dec. 1912; Circular 196 (21 April 1921); M.H. Memorandum T 71 (1 June 1922); Circulars 549 and 549A (22 Dec. 1924). C.M.O.H. also concerned.

notification, form of-see infectious disease.

treatment—National Insurance Act 1911: s. 64; P.H. (Tuberculosis) Act 1921; National Health Insurance Act 1924: s. 120 (10).

Unhealthy areas—

representation to Local Authority—Housing of the Working Classes Act 1890: s. 5.

Unsound food—

inspection, seizure, search warrant—P.H. Act 1875: s. 116-119. P.H.A.A. Act 1890: s. 28 (note 3). [In London, P.H. (L.) Act 1891: s. 47, 115]; also P.H. (Regulations as to Food) Act 1907; Public Health (First Series: Unsound Food) Regulations 1908 (S.R.O. 718 of 1908); L.G.B. Circular, 16 Sept. 1908. and see foreign meat, meat, milk, shellfish.

Urinals, public—
advising re (note 1)—P.H. Act 1875: s. 39; P.H.A.A. Act 1890:
s. 20 (note 3); P.H.A.A. Act 1907: s. 43, 44, 47 (note 3).

Vaccinators, Public—and M.O.H.—Vaccination Acts 1867, 1871, 1898 and 1907.

Venereal diseases—

administration—Venereal Disease Act 1917; P.H. (Venereal Diseases) Regulations 1916 (S.R.O. 467 of 1916); 3 L.G.B. Circulars, 13 July 1916; L.G.B. Memorandum, July 1916.

Vital statistics—

see deaths, transferable.

Water supply—

sufficiency of supply to house—P.H. Act 1875: s. 62, 70; P.H. (Water), Act 1878: s. 3, 6. [In London, P.H. (L.) Act 1891: s. 48, 54.]

chlorination—M.H. Circular 241 (15th Sept 1921).

shortage—M.H. Circular 288 (29 March 1922); M.H. Circular 321 (23 June 1922).

conserving supplies—M.H. Memorandum (June 1922).

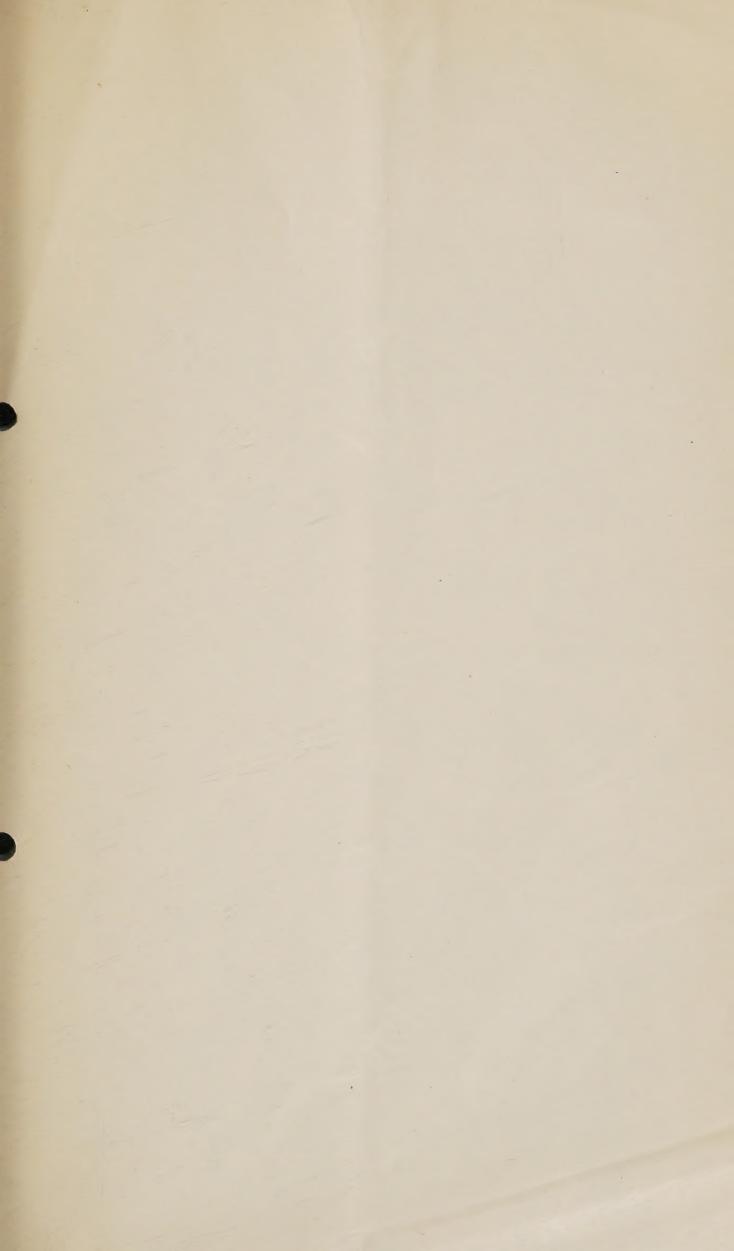
general control (note 1)—P.H. Act 1875: s. 51 to 70, s. 299; P.H. (Water) Act 1878; P.H.A.A. Act 1890: s. 47 (note 3). [In London, P.H. (L.) Act 1891: s. 48 to 54.]

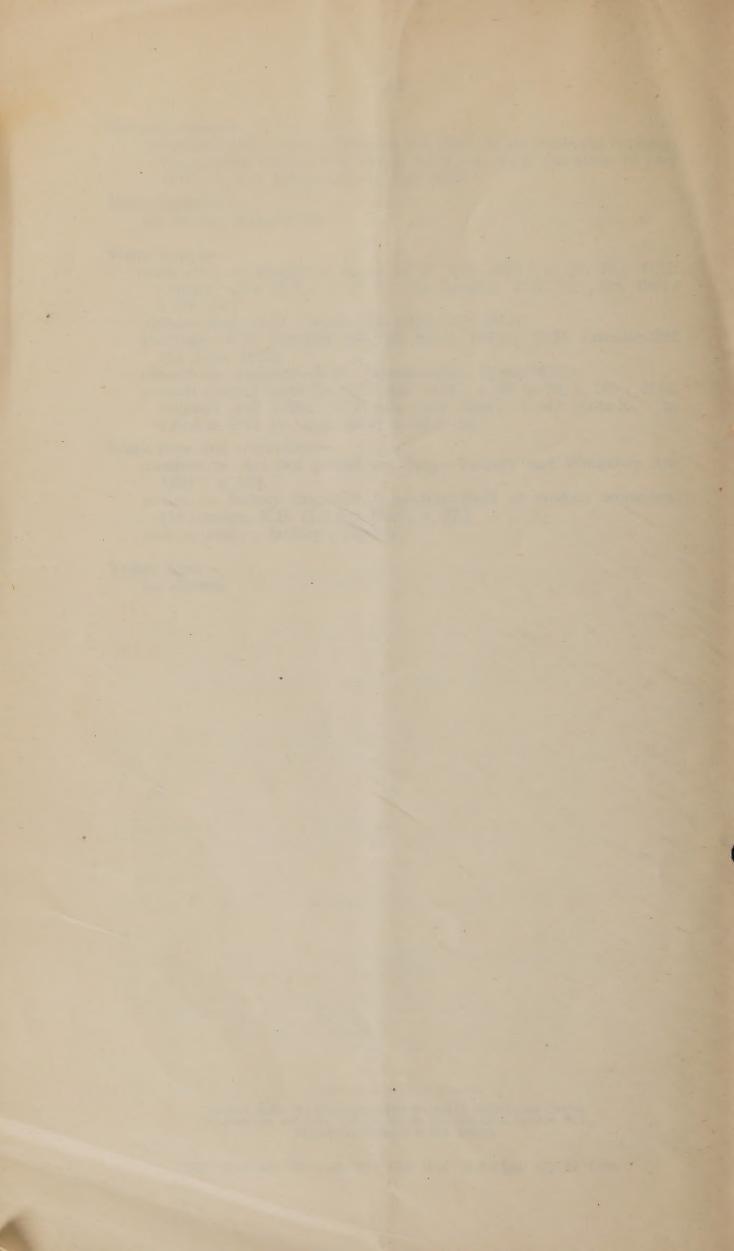
Workshops and workplaces—

abstract of Act not posted up, duty—Factory and Workshop Act 1901: s. 133.

notice to factory inspector respecting child or woman employed. [In London, P.H. (L.) Act 1891: s. 27.] and see entry: factory: reports.

Yellow fever see cholera.





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